

**UNITED STATES DISTRICT
COURT**

FILED
IN CLERKS OFFICE
for the
DISTRICT OF MASSACHUSETTS
2019 JUN 25 PM 4:13
U.S. DISTRICT COURT
DISTRICT OF MASS.

PAUL JONES*Plaintiff*

v.

Civil Action No.: **1:19-CV-11076-**
FDS**DOLAN CONNLY P.C., ET AL.***Defendant***SUMMONS IN A CIVIL ACTION**To: (*Defendant's name and address*)

LINDA ORLANS
1650 West Big Beaver RD
TROY, MI 48084

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) --- or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) --- you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Paul Jones
572 Park St.
Stoughton, MA 02072

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.



ROBERT M. FARRELL

CLERK OF COURT

/s/ - Matthew McKillop

Signature of Clerk or Deputy Clerk

ISSUED ON 2019-05-09 14:01:54.0, Clerk USDC DMA

Civil Action No.: **1:19-CV-11076-FDS**

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for (name of individual and title, if any)

LINDA ORLANS

was received by me on (date) MAY 11, 2019

I personally served the summons on the individual at
(place) _____

_____ on (date) _____ ; or

I left the summons at the individual's residence or usual place of abode with
(name) _____

_____, a person of suitable age and discretion who resides
there,

on (date) _____, and mailed a copy to the individual's last known address; or

I served the summons on (name of individual) Julie Moran, who is
designated by law to accept service of process on behalf of (name of
organization) _____

LINDA ORLANS on (date) 06/07/19; or

I returned the summons unexecuted because _____;
or

Other (specify) :

My fees are \$ _____ for travel and \$ _____ for services, for a total of
\$ 26.00.

I declare under penalty of perjury that this information is true.

06/07/19
Date

Tinae Zeldman
Server's Signature

Liana Williams S
Printed name and title

12 Westminster Ave, Rox MA 02119
Server's Address

Additional information regarding attempted service, etc:

USPS Tracking®

FAQs > (<https://www.usps.com/faqs/uspstracking-faqs.htm>)

Track Another Package +

Tracking Number: 70151520000018143802

Remove X

On Time

Expected Delivery on

MONDAY

10 JUNE by
2019 i 8:00pm i

Feedback

 Delivered

June 10, 2019 at 2:38 pm
Delivered, Left with Individual
WALTHAM, MA 02452

Get Updates ▾

Text & Email Updates



Tracking History



Product Information



See Less ^

Can't find what you're looking for?

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LINDA ORLANS
C/O Julie Moran
465 Waverly Oaks RD
WATTHAM, MA 02452



9590 9402 2891 7069 1241 55

2. Article Number (Transfer from service label)

70151520000018143802

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

 A.OH
 Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

6-6

D. If delivery address different from Item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

USPS TRACKING



1 JUN 2015 PM 2

 First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-40

9590 9402 2891 7069 1241 55

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box*

Liana Williams
79 Thompson St
Springfield, MA 01109

 U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit our website at www.usps.com**OFFICIAL USE**

Certified Mail Fee \$2.50

Extra Services & Fees (check box, add fee as applicable)	\$ 2.80
<input type="checkbox"/> Return Receipt (handcopy)	\$ 0.00
<input type="checkbox"/> Return Receipt (electronic)	\$ 0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 0.00
<input type="checkbox"/> Adult Signature Required	\$ 0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ 0.00

Postage \$7.55

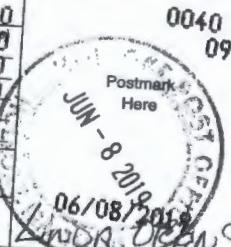
Total Postage and Fees \$13.65

Sent To
C/O Julie Moran
Street and Apt. No., or PO Box No.
465 Waverly Oaks RD

City, State, ZIP+

WATTHAM, MA 02452

PS Form 3800, April 2015 PSN 7530-02-000-9047



See Reverse for Instructions